



F.

**Emergencies** (During non-office hours)

Telephone Number

Facsimile Number

E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

G. Jarrold Harper – Manager, Regulatory & Compliance 2100 Renaissance Blvd., King Of Prussia, PA 19406  
**Regulatory Officer** (Include address if different than above.)

610-755-4446

347-287-0845

jharper@broadviewnet.com

Telephone Number

Facsimile Number

E-mail Address

H. Jarrold Harper  
**Dual Party Mailings** (Name)

2100 Renaissance Blvd., King Of Prussia, PA 19406

Mailing Address

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347-287-0845

jharper@broadviewnet.com

Telephone Number

Facsimile Number

E-mail Address

I. Jarrold Harper  
**Interim LEC Fund Mailings** (Name)

2100 Renaissance Blvd., King Of Prussia, PA 19406

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347-287-0845

jharper@broadviewnet.com

Telephone Number

Facsimile Number

E-mail Address

J. Jarrold Harper  
**Universal Service Fund Mailings** (Name)

2100 Renaissance Blvd., King Of Prussia, PA 19406

Mailing Address

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jharper@broadviewnet.com

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Facsimile Number

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K. Jarrold Harper  
**Gross Receipts Mailings** (Name)

2100 Renaissance Blvd., King Of Prussia, PA 19406

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Telephone Number

Facsimile Number

E-mail Address

L. Jarrold Harper  
**Lifeline Mailings** (Name)

2100 Renaissance Blvd., King Of Prussia, PA 19406

Mailing Address

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jharper@broadviewnet.com

Telephone Number

Facsimile Number

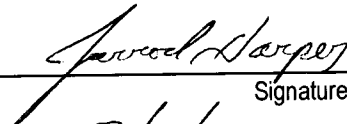
E-mail Address

Jarrold Harper

This form was completed by (print name)

Manager, Regulatory & Compliance

Title



Signature

3/5/10

Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC  
**Docketing Department**  
Post Office Drawer 11649  
Columbia, South Carolina 29211

Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201

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